1

Plea	2
Unde	

Please type a pl	lus sign (+) inside this box -> +			Approved for use three	PTO/SB/05 ough 09/30/2000. OMB 065	1-0032	
Under the Paper	work Reduction Act of 1995, no persons are re	equired to res	Patent and <u>pond to a collection of i</u>	Trademark Office: U. nformation unless it di	S. DEPARTMENT OF COMN isplays a valid OMB control n	MERCE umber.	
UTILITY A			rney Docket No.	120	0 01449 US		
I DAT	• •			tion Identifier C	hristopher Mark Elms et	al.	
ירי		Title	Matching and Assist and to an Order	ing a Buyer and a Vendo	r from an Inquiry, through a Propo	osal, D	
(Only for new n	TRANSMITTAL (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))			EL597435566US			
	PPLICATION ELEMENTS apter 600 concerning utility patent application	contents.	ADDRESS	Assistant C Box Patent Washington		73 [	
,  *F	ee Transmittal Form (e.g., PTO/SB/17)	)	5. Micro	fiche Computer Pro		Ď	
2. 🖊 Sp	ubmit an original and a duplicate for fee processecification  [Total Pages		6. Nucleotide	•	Sequence Submission		
	eferred arrangement set forth below) Pescriptive title of the Invention		а.	Computer Reada	ble Copy		
- C	cross References to Related Applications tatement Regarding Fed sponsored R &		b. 🔲	Paper Copy (ider	ntical to computer copy)		
•	teference to Microfiche Appendix		с. 🗌	Statement verifyi	ng identity of above copie	es	
-в	ackground of the Invention		ACCO	MPANYING API	PLICATION PARTS		
1	rief Summary of the Invention				er sheet & document(s))		
1	rief Description of the Drawings (if filed) letailed Description		37 C.I		ment Power of		
-c	claim(s)			_	ument (if applicable)		
	bstract of the Disclosure		Inform	nation Disclosure	Copies of IDS	3	
	awing(s) (35 U.S.C. 113) [Total Sheets	5]	Stater State	ment (IDS)/PTO-14	49 Citations		
4. Oath or L	Declaration [Total Pages	4 ]	<u> </u>	ninary Amendment			
a. <b>L</b>	Newly executed (original or copy)			n Receipt Postcard Ild be specifically it			
b.	Copy from a prior application (37 C (for continuation/divisional with Box 16 c	F.R. § 1.63	(d)) * Sma	* Small Entity Statement filed in prior application			
	i. DELETION OF INVENTOR(S)			13. Statement(s) Status still proper and desired			
	" Signed statement attached inventor(s) named in the price		Certified Copy of Priority Document(s)				
	see 37 C.F.R. §§ 1.63(d)(2)		· • ·	· · · · · · · · · · · · · · · · · · ·	•		
* NOTE FOR I	TEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY LL ENTITY STATEMENT IS REQUIRED (37 C.F.R. §	SMALL ENTIT	70 L	***************************************			
IF ONE FILED	IN A PRIOR APPLICATION IS RELIED UPON (37	C.F.R. § 1.28).		*****************************	***************************************		
	NTINUING APPLICATION, check appropri	riate box, and	supply the requisite info	ormation below and in	a preliminary amendment:		
]	المسا	ıation-in-part (	CIP) of prior ap	opilication 140	9 /		
For CONTINU	olication information: Examiner  IATION or DIVISIONAL APPS only: The enti	re disclosure	of the prior application	Group / Art Unit: on, from which an o	ath or declaration is suppli	ed	
under Box 4b	o, is considered a part of the disclosure of t ne incorporation <u>can only</u> be relied upon wl	he accompai	nving continuation or	divisional application	n and is hereby incorporate	ed by	
			ENCE ADDRESS	ay omittee iron the	submitted application parts	s.	
	Stangers (* C. You		Marian Salah	(*3)) 83			
Custom	er Number or Bar Code Label (Insert Custo	mer No, or A		or 🔽 Cor	rrespondence address below		
Name	Anthony Miologo	s <b>1</b>	<b>28</b>				
	Honeywell International Inc.  PATENT TRADEPHRIK OFFICE						
Address	101 Columbia Road						
	POB 2245						
City	Morristown	State	NJ	Zip Code	07962		
Country	U.S.A. Te	elephone	602-313-5683	Fax	602-313-4559		
Name (P	Print/Type) Anthony Miolog	Ans ()	Registration	No (Attorney/Agent)	29 677	7	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

Date

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

FEE TRANSMITTAL For FY 2001 Patent fees are subject to annual revision.		COMPLETE IF KNOWN			
		Application No.	T. B. D.  09/17/2001  Christopher Mark Elms, et al.		
		Filing Date			
		First Named Inventor			
		Group Art Unit	T. B. D.		
TOTAL AMOUNT OF PAYMENT	\$1,094.00	Examiner Name	T. B. D.		
	1,,00	Attorney Docket No.	I20 01449 US		

Account Number 01-1125 Code \$ Code \$ Fee Description Paid 105 130 205 65 Surcharge - late filling fee or oath 127 50 227 25 Surcharge - late provisional filling fee or cover sheet Account Honeywell International Inc.					Doom	31110:   120 01443 00	_
Large Entity   Small Entity   Fee   Fee   Pee	METHOD OF PAYMENT (check one)				FEE	CALCULATION (continued)	
Charge any Additional Fee Required   12	1 The Commissioner is hereby authorized to charge		<b>ADDITI</b>	ONAL	<b>FEES</b>		
Code   S   Code   S   Suchargo - late filting fee or cath	indicated fees and credit any overpayments to:	Large	Entity	Smal	Entity		
Number   130   205   65   Surcharge - late filling fee or coal f	Deposit	Fee	Fee	Fee	•	Fee	ı
Charge any Additional Fee Required		1				Fee Description Paid	<u> </u>
Honeywell International Inc.   139   130   139   130   Non-English specification   N		ll .				Surcharge - late filing fee or oath	
Charge any Additional Fee Required   147 2,520   147 2,520   For filing a request for ex parte reexamination   12 920° 112 920°   Requesting publication of SIR parts Examiner action   13 1,840° 113 1,840°   1	Deposit Account Honeywell International Inc	II					
Charge any Additional Fee Required   112   920*   112   920*   120*   131   1,840*   113   130   113   130   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   113   130*   120*   130	Name Name	11					
Name   Chim   State	—— Charge any Additional Fee Required	H			•		
Payment Enclosed:		li .					
Payment Enclosed:   Money Order   Other		H	-		•		
Check	2. Payment Enclosed:	il					
The complete comple	Check Money Order Other	li i					
1,	EEE CALCULATION	11					
119   310   219   155   Notice of Appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   310   220   155   Filling a brief in support of an appeal   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130   120   130							
120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   120   310   220   155   Filing a brief in support of an appeal   121   270   221   135   Request for oral hearing   120   24		il .					
121   270   221   135   Request for oral hearing   138   1,510   139   130   138   1,510   139   148	1927 \$ T _ T	il					
100   710   201   355   Utility Filing Fee   710   138   1,510   138   1,510   138   1,510   Pelition to institute a public use proceeding   140   110   240   55   Pelition to revive – unavoidable   141   1,240   241   620   Pelition to revive – unavoidable   141   1,240   242   620   Utility issue fee (or reissue)   142   1,240   242   620   Utility issue fee (or reissue)   143   440   243   220   Design issue fee   144   600   244   300   Plant issue fee   144   600   244   300   Plant issue fee   122   130   122   130   122   130   122   130   122   130   122   130   122   130   122   130   Plant issue fee   123   50   Processing fee under 37 CFR 1,17(q)   126   180   24	1 200	[]					
140   110   240   55   Petition to revive - unavoidable		Ji				<u>-</u>	
141   1,240   241   620   Petition to revive – unintentional   142   1,240   242   620   Utility issue fee (or reissue)   143   144   150   214   75   Provisional Filing Fee   144   1,240   242   620   Utility issue fee (or reissue)   143   440   243   220   Design issue fee   143   144   600   244   300   Plant issue fee   142   1,240   242   620   Utility issue fee (or reissue)   144   600   244   300   Plant issue fee   144   600   244		140	110	240	-	h	
142   1,240   242   620   Utility issue fee (or reissue)	1 14.13	141	1,240	241			_
Subtotal (1)   \$710.00   144   600   244   300   Plant issue fee		142	1,240	242	620		_
2	∄14 150 214 75 Provisional Filing Fee	143	440	243	220	Design issue fee	
2	SUBTOTAL (1) \$710.00	144	600	244	300	Plant issue fee	_
Extra Claims   Fee from below   Fee Paid   126   180   126   180   126   180   Submission of Information Disclosure Statement   126   180   126   180   Submission after final rejection (37 CFR 1.129(a))   146   710   246   355   Filing a submission after final rejection (37 CFR 1.129(a))   149   710   249   355   For each additional invention to be examined (37 CFR 1.129(a))   149   710   249   355   For each additional invention to be examined (37 CFR 1.129(a))   149   710   279   355   Request for Continued Examination (RCE)   102   80   202   40   104   104   104   105   1		122	130	122	130	Petitions to the Commissioner	
Total Claims  28 6 6 7 7 7 7 8 7 8 8 7 8 8 8 8 8 8 8 8		123	50	123	50	Processing fee under 37 CFR 1.17(q)	
Targe Entity Small Entity Fee Fee Fee Fee Code \$ Code \$ Fee Description 103 18 203 9 Claims in excess of 30 104 270 204 135 Multiple dependent claims over original patent 109 80 209 40 Reissue claims in excess of 3 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Reissue claims in excess of 20 110 18 210 9 Registration No (Attomey/Agent) 29,677 Telephone 602-313-5683	Total Claims Fee Faid	126	180	126	180	Submission of Information Disclosure Statement	$\neg$
146   710   246   355   Filing a submission after final rejection (37 CFR 1.129(a))   149   710   249   355   For each additional invention to be examined (37 CFR 1.129(b))   1.129(b))   1.129(b)	18.00   144.00   17.00   18.00   144.00   17.00   18	581	40	581	40		
Fee Fee Fee Fee Fee Fee Code \$ Fee Description 179 710 279 355 Request for Continued Examination (RCE) 169 900 169 900 Request for expedited examination of a design application 195 300 195 300 Publication fee 195 300 Publi		146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim 109 80 209 40 Reissue independent claims over original patent 110 18 210 9 Reissue claims in excess of 20 and over original patent  SUBTOTAL (2)  SUBMITTED BY  Complete (if applicable)  Registration No (Attomey/Agent)  Registration No (Attomey/Agent)  Registration No (Attomey/Agent)  Registration No (Attomey/Agent)  29,677  Request for expedited examination (NOE)  169 900 169 900 Request for expedited examination (NOE)  195 300 195 300 Publication fee  Control of Complete (If applicable)  Registration No (Attomey/Agent)  Registration No (Attomey/Agent)  29,677  Registration No (Attomey/Agent)	Fee Fee Fee	149	710	249	355		
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim 109 80 209 40 Reissue independent claims over original patent 110 18 210 9 Reissue claims in excess of 20 and over original patent  SUBTOTAL (2) \$384.00  SUBMITTED BY  Name (Print / Type)  Anthony Miologos  Registration No (Attomey/Agent)	1 00 200011511011	179	710	279	355	Request for Continued Examination (RCE)	$\Box$
of 3  104 270 204 135 Multiple dependent claim 109 80 209 40 Reissue independent claims over original patent 110 18 210 9 Reissue claims in excess of 20 and over original patent  SUBTOTAL (2) \$384.00  * Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$-0-  SUBMITTED BY  Name (Print / Type)  Anthony Miologos  Registration No (Attomey/Agent) 29,677  Registration No (Attomey/Agent) 29,677  Telephone 602-313-5683		169	900	169	900	Request for expedited examination of a design application	$\neg$
104 270 204 135 Multiple dependent claim 109 80 209 40 Reissue independent claims over original patent 110 18 210 9 Reissue claims in excess of 20 and over original patent  SUBTOTAL (2) \$384.00 ** Reduced by Basic Filling Fee Paid ** SUBTOTAL (3) \$\$-0-\$\$  SUBMITTED BY  Name (Print / Type) Anthony Miologos Registration No (Attomey/Agent) 29,677 Telephone 602-313-5683	The state of the s	195	300	195	300	Publication fee	
over original patent  110 18 210 9 Reissue claims in excess of 20 and over original patent  SUBTOTAL (2) \$384.00 * Reduced by Basic Filing Fee Paid  **Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$-0-  **SUBMITTED BY  Name (Print / Type) Anthony Miologos Registration No (Attorney/Agent) 29,677 Telephone 602-313-5683	104 270 204 135 Multiple dependent claim						
SUBMITTED BY  Name (Print / Type)  Anthony Miologos  Reduced by Basic Filling Fee Paid  SUBTOTAL (3)  \$-0-  SUBMITTED BY  Complete (if applicable)  Registration No (Attorney/Agent)  Page 18 (Attorney/Agent)  SUBTOTAL (3)  \$-0-  \$-0-	109 80 209 40 Reissue independent claims	Other fee (specify) Certified copies (2)			copies (2)	$\dashv$	
SUBMITTED BY  Name (Print / Type)  SUBMITTED BY  Reduced by Basic Filing Fee Paid  Complete (if applicable)  Registration No (Attorney/Agent)							
SUBMITTED BY  Name (Print / Type)  Anthony Miologos  Registration No (Attorney/Agent)  Registration No (Attorney/Agent)  29,677  Telephone 602-313-5683		* Reduc	ed by Basic	Filing Fe	e Paid	SUBTOTAL (3) \$-0	) <u>-</u> ]
Name (Print / Type)  Anthony Miologos  Registration No (Attorney/Agent)  29,677  Telephone 602-313-5683	SUBIOTAL (2) \$384.00						
Name (Print / Type)  Anthony Miologos  Pegistration No (Attorney/Agent)	SUBMITTED BY					Complete (if applicable)	$\overline{\ \ }$
11-47-10 10 10 11	Name (Print / Type) Anthony Miologos	. ()					$\exists$
	Signature TTUMW W	Nho		<i>y</i> . 9.	<u>-</u>	Date 61/17/01	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take .2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time are required to complete this from should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C., 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, D.C., 20231.

The start first of the start from the start of the start

Docket No. I23 01449 US Serial No. T. B. D. Filed 09/17/2001

## Certificate of Mailing under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service, Mailing Label No. **EL597435566US** addressed to:

Box Application Assistant Commissioner of Patents Washington, D.C. 20231

on September 17, 2001
(Date)

Signature

Tessa Ricar

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

- 1. Utility Patent Application Transmittal;
- 2. Fee Transmittal for FY 2001, two copies;
- 3. Patent application, twenty-seven pages;
- Drawings, informal, five sheets;
- 5. Declaration for Utility or Design Patent Application, unsigned, four pages;
- Certificate of Mailing;
- Return post card.

U.S. Express Mail Airbill No. EL597435566US